

114

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. 10/014,310  
Filing Date December 11, 2001  
Inventor Ritesh Shah et al  
Assignee Honeywell International Inc.  
Group Art Unit 1753  
Examiner H. Wilkins  
Attorney's Docket No. 32120-CON1  
Title: Methods of Forming Metal Articles

Assistant Commissioner for Patents  
Art Unit 1753  
Washington, D.C. 20231

**SUBMISSION OF ADDITIONAL CLAIM FEES**  
(37 C.F.R. Section 1.16(b), (c), and (d) (presentation of extra claims))

**1. Additional Fees**

Applicants submit herewith a check in the amount of \$396.00 that represent additional fees for claims filed in a Third Supplemental Amendment dated 02/06/2003. A fee transmittal form PTO/SB/17 is included with total claims and claims previously paid.

The Commissioner is hereby authorized to charge any additional fees required under 37 C.F.R. Section 1.16 and Section 1.17 and credit any overpayments to account no. 23-0925.

Date: 06 Mar 2003

  
\_\_\_\_\_  
Signature of Practitioner

James E. Lake  
Reg. No.: 44,854  
Customer No.: 021567

**CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. section 1.8(a))**

08/21/2003 RSHOLSGN 00009006 10014310

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Date: March 4, 2003

  
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**Gail Wright**  
(type or print name of person certifying)


Please type a plus sign (+) inside this box → ☐

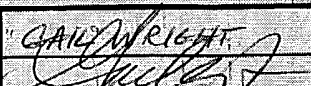
PTO/SB/21 (6-98)  
Approved for use through 09/30/2000 OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	10/014,310
	Filing Date	December 11, 2001
	First Named Inventor	Ritesh P. Shah
	Group Art Unit	1753
	Examiner Name	H. Wilkins
Total Number of Pages in This Submission		Attorney Docket Number 32120-CON1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): PTO return postcard (2) A check for \$396.00 Submission of Additional Claim Fees.
Remarks: Customer No. 021567 The Commissioner is hereby authorized to charge any additional fees required under 37 CFR Sections 1.16 and 1.17 and credit any overpayments to: 23-0925.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James E. Lake Reg. No. 44,854; Wells St. John P.S.
Signature	
Date	05 Mar 2003

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 3/6/2003	
Typed or printed name	GAIL WRIGHT
Signature	
Date	March 6, 2003

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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments *must* be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)**396.00**

## Complete if Known

Application Number **10/014,310**  
Filing Date **December 11, 2001**  
First Named Inventor **Ritesh Shah**  
Examiner Name **H. Wilkins**  
Group / Art Unit **1753**  
Attorney Docket No. **32120-CON1**

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **23-0925**

Deposit Account Name **Wells St. John P.S.**

- ☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. ☒ Payment Enclosed:  
☒ Check ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
101	690	201	345	Utility filing fee	0.00
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	690	208	345	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$)**0.00**

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
44	20** = 8	18	144
18	3** = 3	84	252
Multiple Dependent			0

\*\*or number previously paid, if greater. For Reissues, see below

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**396.00**

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	0.00
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	0.00
139	130	139	130	Non-English specification	0.00
147	2,520	147	2,520	For filing a request for reexamination	0.00
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	0.00
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	0.00
115	110	215	55	Extension for reply within first month	0.00
116	380	216	190	Extension for reply within second month	0.00
117	870	217	435	Extension for reply within third month	0.00
118	1,360	218	680	Extension for reply within fourth month	0.00
128	1,850	228	925	Extension for reply within fifth month	0.00
119	300	219	150	Notice of Appeal	0.00
120	300	220	150	Filing a brief in support of an appeal	0.00
121	260	221	130	Request for oral hearing	0.00
138	1,510	138	1,510	Petition to institute a public use proceeding	0.00
140	110	240	55	Petition to revive - unavoidable	0.00
141	1,210	241	605	Petition to revive - unintentional	0.00
142	1,210	242	605	Utility issue fee (or reissue)	0.00
143	430	243	215	Design issue fee	0.00
144	580	244	290	Plant issue fee	0.00
122	130	122	130	Petitions to the Commissioner	0.00
123	50	123	50	Petitions related to provisional applications	0.00
126	240	126	240	Submission of Information Disclosure Stmt	0.00
581	40	581	40	Recording each patent assignment per property (times number of properties)	0.00
146	690	246	345	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00
149	690	249	345	For each additional invention to be examined (37 CFR § 1.129(b))	0.00
Other fee (specify)					0.00
Other fee (specify)					0.00
Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$) <b>0.00</b>					

## SUBMITTED BY

Name (Print/Type) **James E. Lake**

Signature

Registration No. (Attorney/Agent) **44,854**

## Complete (if applicable)

Telephone **US-509-624-4276**

Date **06 Mar 2003**

## WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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Assistant Commissioner for Patents  
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Washington, D.C. 20231

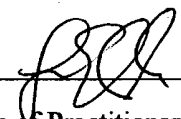
**SUBMISSION OF ADDITIONAL CLAIM FEES**  
(37 C.F.R. section 1.16(b), (c), and (d) (presentation of extra claims))

**1. Additional Fees**

Applicants submit herewith a check in the amount of \$918.00 that represent additional fees for claims filed in a Second Supplemental Amendment dated 6/24/2002. A fee transmittal form PTO/SB/17 is included with total claims and claims previously paid.

The Commissioner is hereby authorized to charge any additional fees required under 37 C.F.R. Section 1.16 and Section 1.17 and credit any overpayments to account no. 23-0925.

Date: 06 Mar 2003

  
\_\_\_\_\_  
Signature of Practitioner

James E. Lake  
Reg. No.: 44,854  
Customer No.: 021567

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18/21/2003 RCHOLSON 00000007 10014310

11 FC:1202  
12 FC:1201

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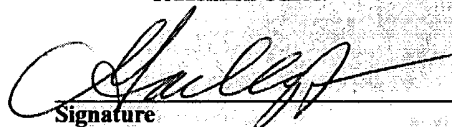
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Date: March 4, 2003

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\_\_\_\_\_  
Signature

**Gail Wright**  
(type or print name of person certifying)

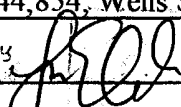
Please type a plus sign (+) inside this box → ☐

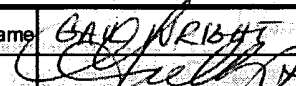
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/014,310
	<b>Filing Date</b>	December 11, 2001
	<b>First Named Inventor</b>	Ritesh P. Shah
	<b>Group Art Unit</b>	1753
	<b>Examiner Name</b>	H. Wilkins
<b>Total Number of Pages in This Submission</b>	<b>Attorney Docket Number</b> 32120-CON1	

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	PTO return postcard (2)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	A check for \$918.00
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	Submission of Additional Claim Fees.
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<b>Remarks</b>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Customer No. 021567	
The Commissioner is hereby authorized to charge any additional fees required under 37 CFR Sections 1.16 and 1.17 and credit any overpayments to: 23-0925.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James E. Lake Reg. No. 44,854; Wells St. John P.S.
Signature	
Date	06 Mar 2003

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Typed or printed name	GARY KRIBAT
Signature	
Date	March 6, 2003

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2000</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.</p>		<b>Complete if Known</b>	
<b>TOTAL AMOUNT OF PAYMENT</b>		Application Number: 10/014,310 Filing Date: December 11, 2001 First Named Inventor: Ritesh Shah Examiner Name: H. Wilkins Group / Art Unit: 1753 Attorney Docket No.: 32120-CON1	
<b>(\$918.00)</b>			

<p><b>METHOD OF PAYMENT (check one)</b></p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: 23-0925</p> <p>Deposit Account Name: Wells St. John P.S.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:  <input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p> <p style="text-align: center;"><b>FEE CALCULATION</b></p> <p><b>1. BASIC FILING FEE</b></p> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>690</td> <td>201</td> <td>345</td> <td>Utility filing fee</td> <td>0.00</td> </tr> <tr> <td>106</td> <td>310</td> <td>206</td> <td>155</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>480</td> <td>207</td> <td>240</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>690</td> <td>208</td> <td>345</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td><b>(\$) 0.00</b></td> </tr> </tbody> </table> <p><b>2. EXTRA CLAIM FEES</b></p> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>36</td> <td>20** = 9</td> <td>18</td> <td>162</td> </tr> <tr> <td>15</td> <td>3** = 9</td> <td>84</td> <td>756</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>10</td> </tr> </tbody> </table> <p><i>**or number previously paid, if greater. For Reissues, see below</i></p> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> </tr> <tr> <td>102</td> <td>78</td> <td>202</td> <td>39</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>104</td> <td>260</td> <td>204</td> <td>130</td> <td>Multiple dependent claim, if not paid</td> </tr> <tr> <td>109</td> <td>78</td> <td>209</td> <td>39</td> <td>** Reissue independent claims over original patent</td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>(\$) 918.00</b></td> </tr> </tbody> </table>	Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid	101	690	201	345	Utility filing fee	0.00	106	310	206	155	Design filing fee		107	480	207	240	Plant filing fee		108	690	208	345	Reissue filing fee		114	150	214	75	Provisional filing fee		<b>SUBTOTAL (1)</b>					<b>(\$) 0.00</b>	Total Claims	Extra Claims	Fee from below	Fee Paid	36	20** = 9	18	162	15	3** = 9	84	756	Multiple Dependent			10	Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	103	18	203	9	Claims in excess of 20	102	78	202	39	Independent claims in excess of 3	104	260	204	130	Multiple dependent claim, if not paid	109	78	209	39	** Reissue independent claims over original patent	110	18	210	9	** Reissue claims in excess of 20 and over original patent	<b>SUBTOTAL (2)</b>					<b>(\$) 918.00</b>	<p><b>3. 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late filing fee or oath	0.00	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	0.00	139	130	139	130	Non-English specification	0.00	147	2,520	147	2,520	For filing a request for reexamination	0.00	112	920*	112	920*	Requesting publication of SIR prior to Examiner action	0.00	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	0.00	115	110	215	55	Extension for reply within first month	0.00	116	380	216	190	Extension for reply within second month	0.00	117	870	217	435	Extension for reply within third month	0.00	118	1,360	218	680	Extension for reply within fourth month	0.00	128	1,850	228	925	Extension for reply within fifth month	0.00	119	300	219	150	Notice of Appeal	0.00	120	300	220	150	Filing a brief in support of an appeal	0.00	121	260	221	130	Request for oral hearing	0.00	138	1,510	138	1,510	Petition to institute a public use proceeding	0.00	140	110	240	55	Petition to revive - unavoidable	0.00	141	1,210	241	605	Petition to revive - unintentional	0.00	142	1,210	242	605	Utility issue fee (or reissue)	0.00	143	430	243	215	Design issue fee	0.00	144	580	244	290	Plant issue fee	0.00	122	130	122	130	Petitions to the Commissioner	0.00	123	50	123	50	Petitions related to provisional applications	0.00	126	240	126	240	Submission of Information Disclosure Stmt	0.00	581	40	581	40	Recording each patent assignment per property (times number of properties)	0.00	146	690	246	345	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00	149	690	249	345	For each additional invention to be examined (37 CFR § 1.129(b))	0.00	Other fee (specify):					0.00	Other fee (specify):					0.00	<b>SUBTOTAL (3)</b>					<b>(\$) 0.00</b>
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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type): James E. Lake	Registration No. (Attorney/Agent): 44,854	Telephone: US-509-624-4276	Date: 06 Mar 2003
Signature:			

**WARNING:**

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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.